

**Bi-Monthly Provider Call  
May 4, 2017**

A provider call was held on May 4, 2017. Presenters on the call included Julie Foster-Hagan, OCDD Deputy Assistant Secretary; Tiffany Dickerson, OCDD Executive Management Officer; Teresa Frank, Waiver Supports and Services; Janae Burr, Waiver Supports and Services; Dolores Sarna, OCDD Quality Assurance; and Kim Kennedy Waiver Supports and Services.

Providers were reminded to submit questions two weeks before the bi-monthly provider call to [OCDD-HCBS@LA.GOV](mailto:OCDD-HCBS@LA.GOV). Provider calls are conducted every other month (January, March, May, July, September, and November) on the first Thursday of the month from 9:00am-11:00am. Questions not received two weeks in advance will be answered on the following provider call. Answers to provider questions, links to websites discussed, and other documents are posted at the link below by clicking on the word "here" in the Monthly Provider Calls and Upcoming Provider Events section of the webpage.

Provider Bi-Monthly Meetings Web link: <http://dhh.louisiana.gov/index.cfm/page/1921>

**Fiscal Initiatives Priorities – Julie Foster Hagan**

A provider had asked that the prioritization of OCDD fiscal initiatives be shared on the provider call. Ms. Foster-Hagan outlined the OCDD fiscal priorities as follows:

- Requested \$4,412,000 to fill allocated slots that had been vacated
- Requested \$34,288,109 for overtime mitigation
- Requested \$4.80 increase in night rate in NOW as part of the new rate methodology
- Requested \$837,077 for RFSR screenings for new individuals
- Requested \$7,442,407 for IFS high need individuals with significant behavioral or medical challenges.
- Requested \$13,823,701 to add 10 hours of IFS services per week to the Supports Waiver
- Requested \$1,005,123 to annualize of slots filled during FY 16/17.
- Requested \$3,734,997 for transition of individuals from the Community Choices Waiver to the Residential Options Waiver to offset the increased cost of the ROW vs. CCW. This project has been in the works for 1.5 years, and we are awaiting CMS approval.

Ms. Foster Hagan advised that these were the requests made by OCDD to LDH; however, the budget requests must first be prioritized by LDH and then by Division of Administration prior to submitting to the Governor's Office. Due to the current state budget climate and shortfalls for state general fund dollars, it will be difficult for the legislature to fund any of the above requests as funding would require cuts in other areas.

**Rate Adjustments for HCBS – Julie Foster Hagan**

A provider asked how rates for Home and Community Based services were adjusted. Ms. Foster Hagan indicated that the rate methodology that is in rule uses both cost reporting and availability of funds. ICF-IDD reimbursement rates are required to be "rebased" every three years based on rule, but any increase is also subject to availability of funds.

## **OCDD Waiver Opportunities Offered – Julie Foster Hagan**

OCDD identified that waiver opportunities were able to be offered in order to meet maintenance of effort requirements for provision of waiver services. There are 55 NOW slots (31 of which are emergency waiver slots), 53 Supports Waiver slots and 125 Children's Choice slots currently being offered.

## **Workforce Collaboration – Tiffany Dickerson**

Ms. Dickerson is working in collaboration with the leadership of the Louisiana Workforce Commission (LWC) on strategies to assist OCDD and OAAS providers with workforce challenges that they have identified, which ranges from recruitment, retention and ways to address the direct service worker shortage. The first step was to determine the size and scope of assistance needed from the LWC by provider in order to determine what information to share and evaluate needed resources and staff. A survey was sent to OCDD and OAAS providers to complete and the results of the survey are posted on the OCDD web page for Providers. The information is listed under the Monthly Provider Calls and Upcoming Provider Events section. Fact sheets and other important links for the LWC are also posted on this webpage.

The LWC can help offer no cost tools and resource to help providers with reducing their cost of onboarding a new employee and finding skilled workers. When providers set up a HiRE account, also known as Helping Individuals Reach Employment with the LWC, they receive access to individuals seeking work as well as the ability to post their open positions.

**IMPORTANT:** When posting a position in LWC HiRE system for direct care staff, please use either Direct Support Worker (DSW) or Direct Support Professional (DSP). Consistency in identifying the position needed will help LWC determine if there is a demand for this type of worker or a shortage of skilled workers available. Questions regarding this initiative should be directed to Tiffany Dickerson at (225) 342-0095.

## **Electronic Visit Verification – Daniel Buco**

We are adding an update to the state sponsored EVV project as a standing agenda item for the bi-monthly provider calls. There are currently fourteen (14) providers who have gone live with LaSRS for in-home clock in/out of services for some of their participants. There are 118 providers in training to go "live".

Benefits of utilizing this system include rounding of services per provider/participant/service/day utilizing the 7/8's rule allowed by CMS. Rounding is ONLY applied to services that are electronically captured in LaSRS and not manually entered or edited. Providers do not have to enter services into LAST if they are using LaSRS. However, LAST is updated with all LaSRS service information within 24 hours so the process for using the LAST information for billing does not change for providers. Also, providers will be notified within 24 hours if a DSW is exceeding the 16 hour rule through a message for blocked services.

The following features are expected to be added to LaSRS in the upcoming months.

- Ability for Supervisors to send messages via LaSRS to their staff and check the date and time those messages were read.
- Time and Attendance Report showing services worked by each DSW including total time for the period,
- Ability for individual users, including DSWs, to run time and attendance reports for themselves,
- Ability to collect non billable services (i.e. trainings, meetings, supervisor pop up visits),
- Report going back one year from provider's go live date that details mismatched payments including unpaid and underpaid claims that can be re-billed to Molina, and
- Ability for provider agencies to input CPR and training dates and receive alerts prior to expiration.

## **CPOC Timelines and Questions – Teresa Frank**

Several questions about CPOC timelines were submitted by providers, support coordination, and regional offices. Teresa Frank clarified the following.

- Timelines for Support Coordinators to submit POCs to the Local Governing Entities (LGEs)
  - Support Coordinators must submit Plans of Care to the LGEs within 35 days following linkage for Children’s Choice, Supports Waiver, and Residential Options Waiver. Support Coordinators have 60 days from date of linkage to submit an approvable POC for New Opportunities Waiver.
  - For initial plans of care, the time span for “linkage to approved plan of care” for Supports Waiver, Children’s Choice Waiver, and Residential Options waiver is 60 days. Time span for “linkage to approved plan of care” for New Opportunities Waiver is 90 days.
  - Annual POCs with all supporting documentation must be submitted to the LGEs at least 35 days prior to the expiration of the POC. This includes the 90-L, DSP back-up plans and emergency plans.
  - Revisions to POCs must be submitted to the LGE within 10 days of the requested effective date.
  - Support Coordination must notify the Direct Support Provider of any change to the POC within three (3) days of receipt of the approved POC from the LGE.
- Extensions of CPOCs – Our CMS waiver application requires us to update the plan of care at least annually (12 months). This is also a performance indicator on which we must report to CMS, and all noncompliance must be remediated. Plans of care are not allowed to be arbitrarily extended. Provider agencies, support coordination agencies, and the LGEs must ensure the appropriate time lines are followed. Reasons for extensions of plans must be documented, and may require the LGE or Support Coordination agency to prepare and implement a Corrective Action Plan.
- Provider agencies must ensure the current CPOCs and ISPs are in the participant’s home, and appropriate person specific training has been provided to every direct service worker in the home.

## **Hurricane Season Preparation – Janae Burr**

Providers and Support Coordination were reminded that we are entering hurricane season, so all emergency plans should have been reviewed at the last quarterly meeting for accuracy. Support coordination should seriously discuss the plan in detail with families and be vigilant throughout the year to ensure it remains accurate. CMS has posted new guidelines regarding emergency preparedness, but they are not currently applicable to PCA or SIL. The GOHSEP website located at <http://www.getagameplan.org/> now contains a “Get a Game Plan” app for android and apple phones.

## **Critical Incident Reporting – Dolores Sarna**

The new critical incident reporting system is currently scheduled for launch by the end of October 2017. OCDD will start the process of enrolling providers. Each licensed entity will get two subscriptions as provider agencies’ staff will be entering incidents into the system. The system will not be available to direct support workers. The system will be able to provide aggregated data in report format. OCDD will supply more information to providers about the types of reports available to them as we get closer to the “Go Live” event. The following departments will be utilizing the new critical incident reporting system: Office for Citizens with Developmental Disabilities (OCDD), Behavioral Health (BH), Office of Aging and Adult Services (OAAS), Health Standards Section (HSS), and Adult Protective Services (APS).

**NOW Rule Notice of Intent – Kim Kennedy**

A Notice of Intent (NOI) will be issued in the next couple of months for changes to the New Opportunities Waiver rule. This NOI will update language to comply with the settings rule, provide clarification of language currently in the rule, and align any changes that occurred with the NOW renewal. Please access the Louisiana State Register on the 20<sup>th</sup> of each month to see if the NOI has been issued. A public comment period will accompany the NOI.

**NEXT CALL is July 6, 2017 at 9am.**

**NEED AGENDA ITEMS FOR July CALL BY June 23, 2017**

**Send agenda items to [OCDD-HCBS@LA.GOV](mailto:OCDD-HCBS@LA.GOV)**